

The Association claims that these control measures are important not only to maintain employee confidence, but, from a public health point of view represent a real contribution. . . .

**Food Poisoning Due to Cadmium-Plated Utensils.**—Because of outbreaks in food poisoning, the Federal Security Agency has advised manufacturers against using cadmium, a substitute for aluminum, in plating cooking utensils and refrigerator containers, Federal Security Administrator Paul V. McNutt announced today.

Mr. McNutt said the Food and Drug Administration and the United States Public Health Service, following an investigation of outbreaks, have found they were due to cadmium, which they said contained a poisonous substance causing severe illness when taken in food even in small amounts.

The Federal Security Agency, Mr. McNutt said, has conferred with representatives of the plating industry, and it is probable that this industry will cease using cadmium for food-container purposes. At the same time the Office of Production Management has stated that it would not release cadmium for this use.

The Administrator said that both the Food and Drug Administration and the Public Health Service have reported that five of the outbreaks, involving at least 50 persons, were traced to the consumption of frozen food which had either been chilled in refrigerators equipped with cadmium-plated ice trays or served in cadmium-plated metal containers.

Symptoms of cadmium poisoning include acute gastritis, nausea, cramps, vomiting, diarrhea, and weakness. Illness may occur within 10 minutes after eating or drinking the contaminated food. As little as 15 parts per million of cadmium may cause acute symptoms. Foods containing acids are particularly apt to be affected.

None of the recently reported cases resulting from the consumption of cadmium with foods has been fatal. Chronic poisoning, with severe damage to vital organs, will, however, result from repeated exposure.

The difficulty of obtaining aluminum and materials used in making stainless steel has led to the use of cadmium, especially in repairing or replating household equipment.

Utensils in which cadmium has most frequently been detected are refrigerator ice trays, plated aluminum ware, water pitchers, meat grinders, and food choppers and mixers.

### Pharmacological Items of Potential Interest to Clinicians\*:

1. *New books:* R. A. Kilduffe and M. DeBailey, *The Blood Bank and Technique and Therapeutics of Transfusion*, Mosby, St. Louis, 1942—well illustrated and documented. A. E. Hertzler, *Diseases of the Thyroid Gland*, Hoeber, New York, 1941, an old master speaking without reference to anyone. The late C. R. Stockard's *Genetic and Endocrine Basis for Differences in Form and Behavior*, Wistar Institute, Philadelphia, 1941. J. E. Moore, *Modern Treatment of Syphilis*, 2nd Ed., Thomas, Springfield, Ill., 1941. T. Farran and R. A. Vonderlehr, *Plain Words about Venereal Diseases*, New York, 1941—public health tries well-meaning but uncomprehending moral crusade. R. H. Major, *Fatal Partners: War and Disease*, Doubleday Doran, Garden City, N. Y., 1941, powerful, timely, maybe we can learn some lessons, even from the Japs. E. Jokl, E. L. Cluver, G. Goedvolk, and T. W. deJongh, *Training and Efficiency: An Experiment in Physical and Economic Rehabilitation*, South African Inst. Med. Res., Johannesburg, 1941—excellent results from sensible methods. P. Mitchiner and E. M. Cowell, *Medical Organisation and Surgical Practice in Air Raids*, 2nd Ed., Churchill, London, 1941. C. Wachtel, *Air Raid Defense (Civilian)*, Chem. Publ. Co., Brooklyn, 1941. Crosby-Fiske-Forster *Handbook of Fire Protection*, 9th Ed., Nat. Fire Prot. Assoc., Boston, 1942.

2. *Management of War Gas Injury:* Over-zealous well-meaners might consider physicians apt to be confused by detail on iden-

tification of war gases, correlation of gas suspected with symptoms, differences in treatment on basis of gas suspected: Simplicity in advice desirable in emergency crises: *First Aid* in suspected poison gas exposure: wash eyes, nose, throat with  $\frac{1}{2}$  teaspoon salt and  $\frac{1}{4}$  teaspoon sodium bicarbonate in glass warm water, remove clothes with gloves, put clothes and gloves in can for decontamination squad, wash body with soap and water, put patient in blankets and evacuate to hospital. Whether for "blast," nitrous fumes, or poison gas, *hospital management* is symptomatic; handle gas burns like heat burns, watch for pneumonia. W. F. von Oettingen (*Pub. Health Bull.* 272, Washington, 1941) surveys dangers of nitrous fumes from explosions which may be confused with poison gas.

3. *Aviation Medicine:* G. F. Rees-Jones and J. E. G. McGibbon (*Lancet*, 2:660, 1941) describe technique of x-ray visualization of Eustachian tube in diagnosis of aviation pressure deafness; diodrat or hippuran probably OK. A. R. Behnke (*Mil. Surg.*, 90:9, 1942) reviews medical problems of high altitude flying and deep diving. W. F. von Oettingen (*Pub. Health Bull.* 274, Washington, 1941) reports careful studies on respiration-circulatory changes in CO poisoning.

4. *Items:* J. F. Fulton reprints still helpful article on reflex paralysis by S. Weir Mitchell, G. R. Morehouse and W. W. Keen (*Circ.* No. 6, SGO, Mar. 10, 1864). R. G. Abell (*Anat. Rec.*, 81:477, 1941) shows 1:2500 Metaphen non-injurious to living tissue if not in contact more than 12 hours. J. L. Morrison (*Univ. Calif. Pub. Pharmacol.*, 2:83, 1942) finds bismuth subcarbonate or kaolin inhibit peristalsis by 25%, CaCO<sub>3</sub>, or BaSO<sub>4</sub> by 18%, and magnesium trisilicate, charcoal, bentonite, or colloidal aluminum hydroxide by 15%. R. T. Simmons et al. (*Med. J. Austral.*, 2:474, 1941) describe preparation and use of M and N testing fluids for blood typing. G. Holler (*Med. Klin.*, 47:984, Sept. 26, 1941) significantly surveys trichinosis. C. A. Handley, H. M. Sweeny and B. T. Brookman (*Proc. Soc. Exp. Biol. Med.*, 48:670, 1941) find brain oxygen and glucose metabolism depressed by pentobarbital and stimulated by metrazol. A. B. and E. B. Gutman (*ibid.*, 687) demonstrate phosphorylase in calcifying cartilage. C. J. Weber, J. J. Lalich and R. H. Major (*ibid.*, 616) report chemotherapeutic promise of 2-(p-nitrobenzenesulfonamido)-pyridine. C. P. Richter and K. H. Clisby (*ibid.*, 684) state phenylthiocarbamide causes gray hair (in rats). The Emersons suggest bioassay method for phenalkylamines (*ibid.*, 700).

5. *Symposium on National Morale:* Nov. 1941 issue *Amer. J. Sociol.*, 47: 277-472.

**Press Clippings.**—Some news items from the daily press on matters related to medical practice follow:

### Allow Income Deductions for Doctors Deductions for Professional Expenses

A professional man may deduct all necessary expenses incurred in the pursuit of his profession. These include the cost of supplies used in his practice, office rent, cost of light, water, fuel and telephone in his office, the hire of office assistants, and expenses paid in the operation and repair of an automobile, based upon the proportion of time it is used for professional purposes.

Many physicians use their residences both as their offices and their homes. In such instances the physician may deduct as a business expense the rental value of the rooms occupied for office purposes if he actually pays rent, and also the cost of light and heat furnished these rooms.

Also, he may deduct a portion of the wages paid domestic servants whose time is partly occupied in caring for these rooms. Membership dues in professional societies are deductible. Physicians and dentists who keep in their waiting rooms current magazines and newspapers for the benefit of their patients may deduct this item as a business expense.

The cost of professional journals for the taxpayer's own use is also a deductible item.

The cost of technical books is not a deductible item, being a capital expenditure, but a proportionate amount for each year's depreciation of the books may be deducted. Depreciation may also be taken on office furniture and equipment. Insurance premiums on office or other professional equipment and liability insurance may be deducted.

A premium paid for automobile liability insurance should be apportioned and that part of the premium attributable to business may be deducted as a business expense.—*San Francisco Call-Bulletin*, February 5.

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### Defense Job Trainees Will Get \$75 a Month While at Classes

*Married Men Will Be Assisted Under Plan; Women Also Urged to Enroll for Courses*

Sacramento, Feb. 5.—A plan to pay men and women \$75 a month to train themselves for defense jobs was announced

\* From the Department of Pharmacology, University of California Medical School (January 21, 1942).

today by the California Department of Education as a means of tapping a new source of manpower for the nation's war production. John C. Beswick, director of vocational and defense instruction, explained this program, sponsored by the Federal Government, will permit married men who must support their families to give up their jobs, get intensive training of one to 4½ months, and then move directly into defense work. . . . San Francisco News, February 5.

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#### Courses in Pediatrics

Thirteen physicians selected from rural areas of California, Nevada, Utah and Arizona are enrolled in an intensive refresher course at the University of California Medical School, San Francisco, on the care of infants and children, according to the university's *Clip Sheet* of January 13. Designed for general practitioners, the course is being given by Dr. Amos Christie, associate professor of pediatrics, and members of the medical school staff, in cooperation with the state department of public health and the California Medical Association. The department of public health of the state from which the physician comes pays his tuition and traveling expenses, these funds being obtained from the children's funds of the social security act. The program is closely connected with the circuit rider plan of the university and the California department of health. Under this plan Dr. Sydney E. Sinclair, associate in pediatrics at the medical school, travels over California as an agent of the state department of health, acting as a consultant for county medical societies, individual physicians and groups involved in the care of young children.—J.A.M.A., January 31.

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#### 7,350,000 State Population Seen

Los Angeles, Dec. 30. (AP).—The California Taxpayers Association estimated today that the State's population as of January 1 will approximate 7,350,000, up 442,613 or 6.4 per cent since the 1940 census.

It estimated Los Angeles County's population total at 2,942,000, up 156,357 or 5.6 per cent, but this biggest county was far down on a percentage increase list.

County percentage gains include:

San Luis Obispo, 44.4; Solano, 42.5; San Diego, 27.9; Napa, 25.2; Monterey, 23.2; Contra Costa, 20.5; Inyo, 16.7; Alpine, 14.6; San Mateo, 13.6; Shasta, 12.8; Plumas, 11.7; Sacramento, 7.4; Madera, 7.2; Marin, 7; Modoc, 6.7.

The association said decreases in fourteen counties appeared to be the result of intrastate migration rather than out-of-State.—San Francisco Examiner, December 31.

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#### Drug Habit Becomes Expensive as War Cuts Off Japanese Morphine; Doctor Kit Thefts Mount

War between United States and Japan has brought no end of trouble to Sacramento's narcotics addicts.

Because the outbreak of hostilities cut off the last major supply of illicit narcotics, drug users now find they must pay from \$300 to \$400 a month to keep up the habit, or resort to thievery to pick up what narcotics they can by looting automobiles of doctors.

A. J. Cecchetti, special investigator for the district attorney's office, said that since last November there have been an average of one theft a week of drugs from autos of physicians, and that more can be expected as the situation becomes even more acute.

Early in the war illegal imports of drugs were cut severely when shipments from Germany and Czechoslovakia were halted, and all that remained, in addition to a trickle of opium still coming in from Mexico, was the "cotton" morphine Japan.

The war, naturally, stopped shipments from Japan of "cotton," so called because the product has a fluffy appearance instead of the shiny look of good morphine. The Mexican opium is of poor quality, Cecchetti said, and far from pure.

Resulting from the dwindling supply has been an enormous boost in prices, until a five-tael can of opium which several years ago brought about \$40, today probably would sell for \$1,000, if anyone could get together at one time the approximate six ounces that make up the five-tael container. Several months ago, at the time of the last large-scale raids conducted in the state, a five-tael can was selling for \$600.

Recent arrests have uncovered only small quantities of morphine, opium and heroin in possession of peddlers and users, and have been found to be of poor quality, often only 8 per cent of normal strength. Prices of the diluted drugs have been about \$10 for one "shot," according to Cecchetti.

Addicts breaking into the doctors' autos usually obtain morphine, morphine sulphate, codeine or dilaudid, the latter a morphine derivative which is very strong.

There have as yet been no burglaries of drug stores, Cecchetti said, nor have there been reported here any selling of prescriptions for drugs, similar to sale of prescriptions for liquor in prohibition days. Elsewhere in the state, he said,

narcotics officers report that some physicians are prescribing narcotics for a price.

A final result of the situation, Cecchetti believes, will be a lot of addicts taking the cure through no fault of their own.—Sacramento Union, January 13.

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#### The Doctors Are Prepared

Fortunately for the welfare of the American people, the American medical profession was preparing for war long before the bombs fell on Pearl Harbor.

Since June, 1940, the Journal of the American Medical Association points out, the medical profession has been intensively engaged in standardization of military medical procedures, encouragement and promotion of scientific military medical research, and enrollment of medical personnel. More than 10,000 physicians have entered military service, and over 25,000 have given their services, without charge, to the Selective Service Boards. Additional thousands of qualified men of medicine are associated with the Army and Navy Medical Corps, the Public Health Service, and other governmental departments of a military or quasi-military nature.

The doctors have shown the highest type of patriotism. On their shoulders falls the vast responsibility of keeping the military and civilian populations mentally and physically fit. They accept that responsibility without reservation. They know the material rewards will be small. Their principal reward will be in the knowledge of a vital public service well done.

The American fighting forces and the American people at large are receiving a kind of medical service unrivaled on earth. No other nation enjoys higher standards of health—and in no other nation are the requirements laid down by the military services, so high. The health of our people is one of our greatest weapons. The doctor will play a decisive role in the winning of the war.—Corona Independent, January 15.

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#### Cyclotron Yields New Clue to Cell Function

Berkeley, Feb. 4.—New information which gives a long sought clue to the function of the living cell, basic unit of all organic life, has been obtained in experiments with the University of California's atom-smashing cyclotron.

A member of the staff of the Radiation Laboratory has reported that the living cell does not go through a genuine "resting" stage during its development, but that there are possibly a number of constantly changing states within this phase.

The primary function of a cell is to reproduce, splitting into two cells and thus making it possible for life to continue. According to classical biological explanations this is done by different phases.

The cell is the simplest biological unit, consisting of a nucleus with chromosomes, the rod-like units which determine inheritance. In the resting phase, which is the beginning of the cycle of reproduction, the chromosomes do not appear as rods in the nucleus, and it had been supposed the cell was in an inactive state.

In an experiment in which cancer and plant cells were bombarded with neutrons from the cyclotron, Dr. Alfred Marshak, research fellow in the Radiation Laboratory, found that there are different and recognizable physiological states within the resting phase.

During the resting stage the neutrons produce relatively more damage to the chromosomes than x-rays. At certain definite periods in the resting stage the relative efficiency of neutrons in producing this chromosome damage is much greater than at others.

This clearly indicates distinct physiological states within the resting phase. The experimenter does not know what these states may be. However, it does give science a new clue to the activity of life's simplest unit.—U. C. Bulletin, February 3, 1942.

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#### Doctors Rap Indiscriminate Administration of Vitamins

Chicago, Jan. 13. (AP).—The American Medical Association's councils on food and nutrition and industrial health expressed disapproval today of "the mass, indiscriminate administration of vitamins to industrial employees."

In a report to the association's annual congress on industrial health, the councils held:

"It is irrational from the therapeutic point of view and therefore has no place in industrial health.

"It is unwise nutritionally because special vitamin preparations cannot take the place of valuable natural foods in achieving the complete satisfactory nutritive state.

"Because a good diet can achieve all that vitamin preparations have to offer and more . . . the practice is uneconomical."

The report added that "much can still be done to improve the nutrition of the industrial worker through careful examination of present (factory lunchroom) facilities to see that they are most effectively used; and if this is done, the need

for any administration of vitamins as such should be comparatively rare, and the result of very special circumstances, rather than the rule as advocates of this plan would have us believe."—Los Angeles Times, January 4.

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#### Dr. Paul A. Dodd Called to Assist War Labor Board

Los Angeles, Jan. 2.—Dr. Paul A. Dodd, authority on labor relations, has been summoned from the University of California at Los Angeles by the National War Labor Board to serve as one of its associate members in clearing its crowded docket.

Dr. Dodd, as Rockefeller traveling fellow to Australia and New Zealand last year, made an intensive study of labor conditions in those countries. He will leave his post as associate professor of economics at the university for a short period in Washington, during which he will assist the newly created board in arbitrating strikes and lock-outs. The main function of the board is to keep the defense industries going.

"I consider it an honor to be of service in this national emergency," said Dr. Dodd at the university. "I am aware of the responsibilities involved. This was must be won. Men have to be kept at work and war supplies must be kept flowing without interruption from our factories to the men in the fields, in the air and on the seas. This is the task of the new National War Labor Board."—U. C. Bulletin, February 3, 1942.

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#### Epidemic Virus Conjunctivitis

During the summer of 1941, according to Holmes, a rapidly spreading type of acute conjunctivitis raged in Oahu, Hawaii. At first, patients and doctors called it "pink eye." However, when repeated cultures and smears were made from conjunctival scrapings and secretions from more than 50 cases, investigators found it impossible to determine any offending organism. In October a considerable number of cases began to appear in California, and the peak of the outbreak was reached in December. At that time authorities noted that 2 per cent of workers in some ship building plants were affected, but the percentage of those affected was higher in special groups, such as welders, whose eyes are notoriously subjected to the trauma of light.

After an incubation period of from two to five days the patients experience pain, excessive lachrimation and the feeling that some granular dusty body or some other foreign substance is in the eye. There is extensive edema, but a purulent discharge is seldom seen. The upper lids are usually reddened and swollen, and blepharospasm is encountered. In many instances ophthalmologists report that the palpebral conjunctivas are intensely reddened, edematous and congested; some have noted also that the bulbar conjunctivas are similarly affected. In Hawaii a characteristic and almost pathognomonic observation was the appearance of multiple subconjunctival hemorrhages on the tarsal portions of the conjunctivas.

In most instances the disease seemed to be self limited. It pursues a leisurely clinical course, in the absence of complications, lasting from two to three weeks. When corneal infiltrates developed, the eyes remained irritated for from four to six weeks or longer. Among the complications were infiltrates of the cornea, which appeared as grayish dots. With the aid of the slit lamp, minute deposits were seen forming a faint haze on the basal layers of the corneal epithelium. In some instances, when secondary infections occurred there was hemorrhagic conjunctivitis, and in a few cases there were ulcers of the cornea.

Thus far attempts to determine the cause of this conjunctivitis have been unavailing, but practically all the observers believe that a specific virus is responsible. In California the health department reports that inoculation of the scrapings into mice, guinea pigs, rabbits and monkeys gave negative results. Also attempts to make aerobic and anaerobic cultures yielded nothing. Studies are being continued in several laboratories with a view to isolating a virus or developing more information concerning the nature of the infection.

As is usual, the person who became infected was inclined to claim as the cause the last activity in which he engaged. The worker at an emery wheel was certain that a piece of the wheel struck his eye, the worker in the pineapple canneries stated that pineapple juice in the eye was responsible, swimmers said that the infection was due to swimming in contaminated water, and welders felt that the disease was directly due to the welding process.

The prevention of this, as of other infections concerning the eye, is definitely related to the prevention of contamination by soiled hands and linens. In industrial plants, medical control of the industrial worker is necessary.

The condition as it occurred in California seemed to be much less virulent and to have a lower grade transmission rate than that in Hawaii. Thus far all methods of specific treatment have been unavailing. Physicians in Hawaii and in California tried

the mild silver preparations, various arsenic preparations, zinc, silver nitrate and alum with the observation that some of these methods of treatment seemed to aggravate the condition rather than to produce benefit. Most comforting was the application of cold compresses. Incidentally, the application of infra-red and other rays, both generally and locally, and the use of sulfonamide derivatives were also unavailing. The complications affecting the eye were treated by the usual technic of dilation and the use of iodine preparations for hastening the absorption of corneal infiltrates.—Editorial, *Jour. A. M. A.*, Feb. 7, 1942.

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#### Seattle Woman Would Cure 'Pink Eye'

California's "epidemic" of infectious conjunctivitis, or "pink eye," yesterday claimed the attention and offered cure of a solicitous Seattle woman.

The industrial accident commission, puzzled by an outbreak of eye infection among industrial workers, particularly in San Francisco, announced the receipt of this letter from a Seattle woman:

"Dear Sir: I read in the Seattle paper that you have an epidemic of sore eyes among your workers. I have a positive cure for the worst case of sore eyes. Got the formula from an old doctor in Shanghai, China. . . . I will gladly go to Frisco and cure every sore eye in three days. I guarantee they'll stay cured."

The industrial accident commission revealed 28 individual claims for compensation resulting from "pink eye" infections, have been filed in the San Francisco office alone, and that "the number of formal claims now pending before the commission admittedly is merely a fraction of the total cases."

Employees contend they are subjected to the disease in some way as a result of their working conditions, while employers maintain the disease is infectious and has nothing to do with the hazards of working conditions.—Sacramento Union, January 27.

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#### What a Chiropractic School Announces!

"The State Board of Chiropractic Examiners last week examined 112 applicants for chiropractic licenses. Of this number the Standard College was represented by 18 graduates, it is reported.

"The Standard Chiropractic College has set the standard in education for drugless practitioners with full facilities for clinic, x-ray, dissection, first aid, physiotherapy and laboratory work far in excess of state board requirements, with three entire buildings devoted to education, states Dr. L. S. McCarty, director. The curriculum maintained in this college leads to degree of doctor of chiropractic. . . ."—San Francisco News, January 21.

#### MEDICAL EPONYM

##### Korsakow's Syndrome

Sergei S. Korsakow (1853-1900), privatdocent of the Imperial University of Moscow, described the syndrome that bears his name in an article entitled "Ueber eine besondere Form psychischer Störung, combinirt mit multipler Neuritis (A Peculiar Form of Psychic Disturbance Associated with Multiple Neuritis)" in the *Archiv für Psychiatrie und Nervenkrankheiten* (21:669-704, 1889). He refers to his first report on the subject, which appeared in a Russian journal, *Westnik Psichiatrii*, during 1887 under the title, "Disturbances in the Psychic Sphere Occurring in Alcoholic Paralysis, and Their Relation to the Psychic Disturbances in Multiple Neuritis of Nonalcoholic Origin." A portion of the translation follows:

"This psychic disturbance is shown sometimes in the form of a well-marked irritable weakness of the psyche, sometimes in the form of confusion, with quite characteristic disorientation in regard to place, time and situation, again as an almost pure variety of acute amnesia, with the most extreme sort of disturbance in the memory for recent events, while remote occurrences are well remembered. This unique psychic change is almost constantly present to a greater or less degree in the multiple neuritis of alcoholic patients; it is not, however, an exclusive characteristic of alcoholic neuritis, but also occurs in neuritides due to a variety of other causes."—R. W. B., in *New England Journal of Medicine*, Vol. 225, No. 17.